

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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CUSTOMER NO. 35811

Docket No.: PMG-05-1321 Confirmation No.: 6281

Art Unit

: 2875

Examiner

: Jacob Y Choi : 10/675,978

Serial No. Filed

: September 30, 2003

Inventors

: Don Post, et al.

Title

: MASK WITH PATTERNED LIGHTING

Dated: July 19, 2006

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

## **Certificate of Mailing Under 37 CFR 1.8**

For

Postcard

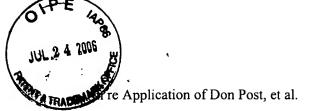
Check in the amount of \$1,020.00 Amendment Transmittal Letter, in duplicate Claim for Extension of Time, in duplicate Response

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date appearing below.

Name of Applicant, Assignee, Applicant's Attorney or Registered Representative:

DLA Piper Rudnick Gray Cary US LLP
Customer No. 35811

Ву:	anisa a. Silahman	
Date:	7/19/06	



Attorney Docket No.: PMG-05-1321

Serial No.:

10/675,978

Filed:

September 30, 2003

For:

MASK WITH PATTERNED LIGHTING

## Mail Stop Amendment

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- \_ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- \_ No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)

(Col. 2) (Col. 3)

**SMALL ENTITY** 

OTHER THAN SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PRE- VIOUSLY PAID FOR	PRESENT EXTRA	
TOTAL	*18	-	** 20=	0	
INDEP.	* 5	-	** 5=	0	
Application Size Fee					
First Presentation of Multiple Dependent Claim					

RATE	ADD'L FEE	OR
x 25 =	\$	
X 100 =	\$	]
	\$	
+180=	\$	

	ADD'L
RATE	FEE
x50 =	\$
x 200 =	\$
x250=	\$
+360=	\$

## TOTAL ADDITIONAL FEE

\$ OR

\$\_\_\_\_

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-2719 in the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is enclosed.
- $\underline{x}$  A check in the amount of \$1,020.00 is attached (extension fee).
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.
  - $\underline{x}$  Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
  - Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,

Thomas Lourling

Reg. No. 31,349

Attorney for Applicants

TJD/WFL/as (215)656-2431